

%STN;HighlightOn= ***;HighlightOff=*** ;

Connecting via Winsock to STN

Welcome to STN International! Enter x:x

LOGINID:ssspta1648rx1

PASSWORD:

TERMINAL (ENTER 1, 2, 3, OR ?):2

* * * * * Welcome to STN International * * * * *

NEWS 1 Web Page for STN Seminar Schedule - N. America
NEWS 2 JUL 28 CA/Caplus patent coverage enhanced
NEWS 3 JUL 28 EPFULL enhanced with additional legal status
information from the epoline Register
NEWS 4 JUL 28 IFICDB, IFIPAT, and IFIUDB reloaded with enhancements
NEWS 5 JUL 28 STN Viewer performance improved
NEWS 6 AUG 01 INPADOCDB and INPAFAMDB coverage enhanced
NEWS 7 AUG 13 CA/Caplus enhanced with printed Chemical Abstracts
page images from 1967-1998
NEWS 8 AUG 15 CAOLD to be discontinued on December 31, 2008
NEWS 9 AUG 15 Caplus currency for Korean patents enhanced
NEWS 10 AUG 27 CAS definition of basic patents expanded to ensure
comprehensive access to substance and sequence
information
NEWS 11 SEP 18 Support for STN Express, Versions 6.01 and earlier,
to be discontinued
NEWS 12 SEP 25 CA/Caplus current-awareness alert options enhanced
to accommodate supplemental CAS indexing of
exemplified prophetic substances
NEWS 13 SEP 26 WPIDS, WPINDEX, and WPIX coverage of Chinese and
and Korean patents enhanced
NEWS 14 SEP 29 IFICLS enhanced with new super search field
NEWS 15 SEP 29 EMBASE and EMBAL enhanced with new search and
display fields
NEWS 16 SEP 30 CAS patent coverage enhanced to include exemplified
prophetic substances identified in new Japanese-
language patents
NEWS 17 OCT 07 EPFULL enhanced with full implementation of EPC2000
NEWS 18 OCT 07 Multiple databases enhanced for more flexible patent
number searching
NEWS 19 OCT 22 Current-awareness alert (SDI) setup and editing
enhanced
NEWS 20 OCT 22 WPIDS, WPINDEX, and WPIX enhanced with Canadian PCT
Applications
NEWS 21 OCT 24 CHEMLIST enhanced with intermediate list of
pre-registered REACH substances

NEWS EXPRESS JUNE 27 08 CURRENT WINDOWS VERSION IS V8.3,
AND CURRENT DISCOVER FILE IS DATED 23 JUNE 2008.

NEWS HOURS STN Operating Hours Plus Help Desk Availability
NEWS LOGIN Welcome Banner and News Items
NEWS IPC8 For general information regarding STN implementation of IPC 8

Enter NEWS followed by the item number or name to see news on that
specific topic.

All use of STN is subject to the provisions of the STN Customer
agreement. Please note that this agreement limits use to scientific
research. Use for software development or design or implementation
of commercial gateways or other similar uses is prohibited and may
result in loss of user privileges and other penalties.

* * * * * STN Columbus * * * * *

FILE 'HOME' ENTERED AT 03:40:12 ON 17 NOV 2008

=> file medline biosis caplus

| COST IN U.S. DOLLARS | SINCE FILE ENTRY | TOTAL SESSION |
|----------------------|---------------------|------------------|
| FULL ESTIMATED COST | 0.21 | 0.21 |

FILE 'MEDLINE' ENTERED AT 03:40:58 ON 17 NOV 2008
FILE 'BIOSIS' ENTERED AT 03:40:58 ON 17 NOV 2008
Copyright (c) 2008 The Thomson Corporation
FILE 'CAPLUS' ENTERED AT 03:40:58 ON 17 NOV 2008
USE IS SUBJECT TO THE TERMS OF YOUR STN CUSTOMER AGREEMENT.
PLEASE SEE "HELP USAGETERMS" FOR DETAILS.
COPYRIGHT (C) 2008 AMERICAN CHEMICAL SOCIETY (ACS)

```
=> egfr
L1      35311 EGFR

=> "epidermal growth factor receptor"
L2      53835 "EPIDERMAL GROWTH FACTOR RECEPTOR"

=> l1 or l2
L3      62793 L1 OR L2

=> "cytotoxic t lymphocyte"
L4      48904 "CYTOTOXIC T LYMPHOCYTE"

=> l3 and l4
L5      79 L3 AND L4

=> l5 and 1970-2005/py
L6      55 L5 AND 1970-2005/PY

=> l6 and antibod?
L7      29 L6 AND ANTIBOD?

=> dup rem l7
PROCESSING COMPLETED FOR L7
L8      18 DUP REM L7 (11 DUPLICATES REMOVED)

=> l8 and peptide
L9      10 L8 AND PEPTIDE

=> kyogo?/au and itoh?/au
L10     19 KYOGO?/AU AND ITOH?/AU

=> shigeki?/au and shichijo?/au
L11     0 SHIGEKI?/AU AND SHICHIJO?/AU

=> l9 and l10
L12     0 L9 AND L10

=> d ti abs so l9 1-10
```

```
L9  ANSWER 1 OF 10      MEDLINE on STN
TI  Identification of   ***epidermal***      ***growth***      ***factor***
    ***receptor*** -derived ***peptides*** recognised by both cellular
and humoral immune responses in HLA-A24+ non-small cell lung cancer
patients.
AB  The   ***epidermal***      ***growth***      ***factor***      ***receptor***
(   ***EGFR*** ) is one of the most appropriate target molecules for
cancer therapy because of its high expression in epithelial cancers. A
novel   ***EGFR*** -tyrosine-kinase inhibitor, ZD1839, has been approved
as a drug for non-small cell lung cancer (NSCLC), and many other agents
are now being tested in clinical trials.   ***Cytotoxic***      ***T***
***lymphocyte*** (CTL)-directed epitope   ***peptides*** could be
another class of useful compounds in   ***EGFR*** -targeted therapies.
However, at present, there are no data on CTL-directed   ***peptides***
of   ***EGFR*** . Therefore, this study aimed to identify immunogenic
***EGFR*** -derived   ***peptides*** in HLA-A24(+) NSCLC patients. We
report in this study three such   ***EGFR*** -derived   ***peptides***
at positions 54-62, 124-132 and 800-809. These   ***peptides*** were
recognised by both cellular and humoral immune responses in most of the
peripheral blood mononuclear cells (PBMCs) and sera from NSCLC patients
that we tested. These results may provide a scientific basis for the
development of   ***EGFR*** -based immunotherapy.
SO  European journal of cancer (Oxford, England : 1990),   *** (2004 Jul) ***
Vol. 40, No. 11, pp. 1776-86.
Journal code: 9005373. ISSN: 0959-8049.
```

```
L9  ANSWER 2 OF 10      MEDLINE on STN
TI  Identification of   ***epidermal***      ***growth***      ***factor***
    ***receptor*** -derived ***peptides*** immunogenic for HLA-A2(+)
cancer patients.
```

Epidermal ***growth*** ***factor*** ***receptor*** (
EGFR) is one of the most appropriate target molecules for cancer
therapy because of its relatively high expression in about one-third of
all epithelial cancers in correlation with neoplastic progression. With
respect to ***EGFR*** -targeted therapies, ***antibodies*** and
tyrosine-kinase inhibitors have been intensively studied, a novel
EGFR -tyrosine-kinase inhibitor ZD1839 has been approved as an
anticancer drug, and many other agents are now under clinical trial. In
addition, ***cytotoxic*** ***T*** ***lymphocyte***
(CTL)-directed epitope ***peptides*** could be another class of
compounds useful in ***EGFR*** -targeted therapies. However, there is
presently no information on CTL-directed ***peptides*** of
EGFR . Therefore, from the viewpoint of development of
peptide -based cancer therapy, this study was intended to determine
the ***EGFR*** -derived ***peptides*** recognised by both cellular
and humoral immunities in HLA-A2(+) epithelial cancer patients. We herein
report finding of two such types of ***EGFR*** -derived
peptides at position 479-488 and 1138-1147, both of which were
recognised by the majority of patients' sera (IgG), and also possessed the
ability to induce HLA-A2-restricted ***peptide*** -specific CTLs
against ***EGFR*** -positive tumour cells in peripheral blood
mononuclear cells (PBMCs) of epithelial cancer patients. These results
may provide a scientific basis for the development of ***EGFR*** -based
immunotherapy for HLA-A2(+) cancer patients.
British journal of cancer, *** (2004 Apr 19) *** Vol. 90, No. 8, pp.
1563-71.
Journal code: 0370635. ISSN: 0007-0920.

ANSWER 3 OF 10 MEDLINE on STN
Cytotoxicity of cord blood derived Her2/neu-specific ***cytotoxic***
T ***lymphocytes*** against human breast cancer in vitro and
in vivo.
The Her2/neu oncogene encodes a transmembrane protein with homology to the
epidermal ***growth*** ***factor*** ***receptor*** .
Overexpression of this gene contributes to the aggressiveness of breast
cancer and poor prognosis. Therefore, Her2/neu is an ideal target
molecule for generating effective ***cytotoxic*** ***T***
lymphocytes (CTLs) against breast cancers. This study reports on
the generation of Her2/neu-specific CTL from umbilical cord blood
mononuclear cells (UCBC) using dendritic cells primed with
Her2/neu-derived ***peptide*** (KIFGSLAFL, E75) for immunostimulation.
The CTLs showed specific cytotoxicity to Her2/neu high expressing MDA-453
but not toward Her2/neu low expressing MDA-231 human breast cancer cells.
Similarly generated CTLs stimulated with irrelevant ***peptide***
pulsed dendritic cells did not show significant cytotoxicity towards
breast cancer targets. The phenotypes of cells in culture showed high
percentage of CD3+, CD4+ and CD8+T cells as determined by flow cytometry.
However, the ***antibody*** mediated blocking assay demonstrated that
only HLA-Class I restricted CD8+ cells are involved in the cytotoxicity.
Furthermore, in vivo studies showed that treatment of SCID mice bearing
MDA-453 tumor with Her2/neu-specific CTLs resulted in significant
inhibition of tumor growth compared to untreated tumor bearing control
mice. These results demonstrate that human umbilical cord blood
mononuclear cells are a good source for generating Her2/neu-specific CTLs
against human breast cancer both in vitro and in vivo.
Breast cancer research and treatment, *** (2004 Jan) *** Vol. 83, No. 1,
pp. 15-23.
Journal code: 8111104. ISSN: 0167-6806.

ANSWER 4 OF 10 MEDLINE on STN
Cancer immunotherapy in head and neck region.
There is no one common immunotherapy for the treatment of head and neck
cancer (H&N cancer). A streptococcal agent, OK-432, which is classified
as a biological response modifier (BRM), is occasionally used by means of
local administration for recurrent H&N cancer, and the response rate is
approximately 18%. In regard to specific immunotherapy, a murine
monoclonal ***antibody*** (named mAb 225) against the
epidermal ***growth*** ***factor*** ***receptor***
(FGFR) that is frequently overexpressed in H&N cancer has been produced in
the U.S.A. Furthermore, to obviate human anti-mouse ***antibody***
responses, a chimeric human-to-murine version of mAb 225 (C225) was
developed by exchanging the constant regions of mAb 225 to counterparts in
human immune globulin. Phase I clinical trials of C225 in the U.S.A.
demonstrated that treatment with C225 was well tolerated and that C225
given in combination with cisplatin has biologic activity. On the other
hand, many tumor antigens recognized by ***cytotoxic*** ***T***
lymphocytes (CTL) have been identified from a variety of malignant
tumors and some of them, including the MAGE-3 antigen, are frequently
expressed in H&N cancer. We identified an MAGE-3-derived epitope

recognized by HLA-A24-restricted CTL from peripheral blood mononuclear cells (PBMC). In contrast we failed to generate CTL specific for MAGE-3+/HLA-A24+ tumors from PBMC in any of 5 HLA-A24+ cancer patients whose tumors expressed the MAGE-3 gene. Therefore, we did not apply MAGE-3-derived CTL epitope in clinical uses such as ***peptide*** vaccine and ***peptide*** pulsed dendritic cell infusion for H&N cancer.

Gan to kagaku ryoho. Cancer & chemotherapy, *** (2001 Apr) *** Vol. 28, No. 4, pp. 461-6.
Journal code: 7810034. ISSN: 0385-0684.

ANSWER 5 OF 10 MEDLINE on STN

HER-2/neu is expressed in human renal cell carcinoma at heterogeneous levels independently of tumor grading and staging and can be recognized by HLA-A2.1-restricted ***cytotoxic*** ***T*** ***lymphocytes***. The HER-2/neu oncoprotein, a 185 kDa membrane-associated tyrosine kinase with extensive homology to the ***epidermal*** ***growth*** ***factor*** ***receptor*** (EGF-R), is overexpressed in breast and ovarian carcinomas. Its overexpression is closely associated with poor prognosis in the course of disease. Here we demonstrate HER-2/neu overexpression in both established cell lines and biopsy material obtained from renal epithelial tumors. Immunohistochemical analysis of human kidney tumor lesions using 2 HER-2/neu-specific ***antibodies*** revealed HER-2/neu expression in more than 40% of primary epithelial renal tumors and more than 30% of primary renal cell carcinoma (RCC) specimens. A distinctive HER-2/neu expression pattern was found in different subtypes of kidney tumors with the highest frequency in chromophilic and chromophobic RCC, but neither associated with disease stage nor tumor grade. Eight of 10 RCC cell lines expressed significant levels of HER-2/neu mRNA and protein, but at a lower level compared with HER-2/neu overexpressing ovarian carcinoma cells. To evaluate the immune response against HER-2/neu expressing HLA-A2-positive (HLA-A2(+)) RCC cells, allogeneic HLA-A2-restricted ***cytotoxic*** ***T*** - ***lymphocyte*** (CTL) lines generated by pulsing dendritic cells with 3 different HER-2/neu-derived ***peptides***, (HER-2(9.369), HER-2(9.435) and HER-2(9.689)), were utilized in chromium-release assays. Specific lysis of HER-2/neu expressing HLA-A2(+) RCC cell lines was mediated by CTL lines specific for each of these 3 HER-2/neu-derived epitopes. The fine specificity of 2 CTL clones was defined to the epitopes HER-2(9.435) and HER-2(9.689). Their specificity was then confirmed by cold target inhibition assays. In addition, CTL-mediated lysis was enhanced by pulsing tumor cells with exogenous HER-2/neu-specific ***peptides***. Our data suggest that (i) HER-2/neu is heterogeneously expressed in different subtypes of RCC, (ii) HER-2/neu is naturally processed by RCC and (iii) HER-2/neu epitopes presented by RCC can be recognized by HLA-A2-restricted, HER-2/neu-specific CTL.
Copyright 2000 Wiley-Liss, Inc.
International journal of cancer. Journal international du cancer, *** (2000 Aug 1) *** Vol. 87, No. 3, pp. 349-59.
Journal code: 0042124. ISSN: 0020-7136.

ANSWER 6 OF 10 BIOSIS COPYRIGHT (c) 2008 The Thomson Corporation on STN Immunobiology of HER-2/neu oncoprotein and its potential application in cancer immunotherapy.

HER-2/neu (also known as HER2 or c-erb-B2) is a 185-kDa protein receptor with tyrosine kinase activity and extensive homology to the epidermal growth factor (EGF) receptor. HER-2/neu is expressed in many epithelial tumors and known to be overexpressed in approximately 20-25% of all ovarian and breast cancers, 35-45% of all pancreatic adenocarcinomas, and up to 90% of colorectal carcinomas. HER-2/neu overexpression represents a marker of poor prognosis. HER-2/neu-positive tumor cells are potentially good targets for tumor-reactive ***cytotoxic*** ***T*** ***lymphocytes*** which have been utilized in immunotherapeutic trials. In addition, the "humanized" monoclonal ***antibody*** Herceptin has been tested in several clinical trials and proved to be an effective adjuvant therapy for HER-2/neu-positive breast and ovarian cancers. Vaccinations aiming at generating T-cell responses are being examined in both experimental and clinical trials. Natural immunity at the level of T and B cells has been observed in patients with HER-2/neu-positive tumors confirming the immunogenicity of HER-2/neu and encouraging vaccination trials with HER-2 protein-derived subunits or synthetic ***peptides***. This review summarizes recent data from patients with various types of HER-2/neu-overexpressing cancers carrying different HLA alleles and exhibiting pre-existent immunity to HER-2/neu-derived synthetic ***peptides***. It also discusses potential advantages of the various vaccination approaches to immunotherapy targeting the HER-2/neu molecule.
Cancer Immunology Immunotherapy, (***March 2004***) Vol. 53, No. 3, pp. 166-175. print.

L9 ANSWER 7 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN
 TI Use of ***epidermal*** ***growth*** ***factor***
 receptor -derived ***peptides*** recognized by both cellular
 and humoral immune responses in cancer patients
 AB The present invention provides ***EGFR*** -derived ***peptides***
 usable in ***EGFR*** -based immunotherapy for cancer. Namely,
 EGFR -derived ***peptides*** capable of inducing both cellular
 and humoral immune responses or a mutant ***peptide*** thereof; a
 polypeptide contg. the above ***peptide***; a nucleic acid mol.
 encoding the same; and a medicinal compn. such as cancer vaccines contg.
 the same; are provided. CTL recognizing HLA complex, and
 antibodies specific to those ***peptides***, are also claimed.
 The ***epidermal*** ***growth*** ***factor*** ***receptor***
 (***EGFR***) is one of the most appropriate target mols. for cancer
 therapy because of its high expression in epithelial cancers.
 Cytotoxic ***T*** ***lymphocyte*** (CTL)-directed epitope
 peptides could be a class of useful compds. in ***EGFR***
 -targeted therapies. However, at present, there are no data on
 CTL-directed ***peptides*** of ***EGFR***. Therefore, this study
 aimed to identify immunogenic ***EGFR*** -derived ***peptides*** in
 HLA-A24+ NSCLC patients. The authors report in this study three such
 EGFR -derived ***peptides*** at positions 54-62, 124-132 and
 800-809. These ***peptides*** were recognized by both cellular and
 humoral immune responses in most of the peripheral blood mononuclear cells
 (PBMCs) and sera from NSCLC patients that we tested. The authors also
 report finding of two such types of ***EGFR*** -derived
 peptides at position 479-488 and 1138-1147, both of which were
 recognized by the majority of patients' sera (IgG), and also possessed the
 ability to induce HLA-A2-restricted ***peptide*** -specific CTLs
 against ***EGFR*** -pos. tumor cells in peripheral blood mononuclear
 cells (PBMCs) of epithelial cancer patients. These results may provide a
 scientific basis for the development of ***EGFR*** -based
 immunotherapy.
 SO PCT Int. Appl., 39 pp.
 CODEN: PIXXD2

L9 ANSWER 8 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN
 TI Non-affinity purification of proteins
 AB A method is disclosed for purifying a target protein from a mixt. contg. a
 host cell protein, comprising subjecting said mixt. to: (a) a non-affinity
 purifn. step, followed by (b) high-performance tangential-flow filtration
 (HPTFF), and (c) isolating said protein in a purity contg. less than 100
 ppm of said host cell protein, wherein said method includes no affinity
 purifn. step.
 SO PCT Int. Appl., 77 pp.
 CODEN: PIXXD2

L9 ANSWER 9 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN
 TI Novel methods for therapeutic vaccination
 AB A method is disclosed for inducing cell-mediated immunity against cellular
 antigens. More specifically, the invention provides for a method for
 inducing ***cytotoxic*** ***T*** - ***lymphocyte*** immunity
 against weak antigens, notably self-proteins. The method entails that
 antigen presenting cells are induced to present at least one CTL epitope
 of the weak antigen and at the same time presenting at least one foreign
 T-helper lymphocyte epitope. In a preferred embodiment, the antigen is a
 cancer specific antigen, e.g. prostate specific membrane antigen (PSM),
 Her2, or FGF8b. The method can be exercised by using traditional
 polypeptide vaccination, but also by using live attenuated vaccines or
 nucleic acid vaccination. The invention furthermore provides immunogenic
 analogs of PSM, Her2 and FGF8b, as well as nucleic acid mols. encoding
 these analogs. Also vectors and transformed cells are disclosed. The
 invention also provides for a method for identification of immunogenic
 analogs of weak or non-immunogenic antigens.
 SO PCT Int. Appl., 220 pp.
 CODEN: PIXXD2

L9 ANSWER 10 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN
 TI Synergistic composition and methods for treating neoplastic or cancerous
 growths and for restoring or boosting hematopoiesis
 AB A method for treating neoplastic or cancerous growths and for treating
 cancer patients to restore or boost hematopoiesis comprises administration
 of a combination of a ***cytotoxic*** ***T*** - ***lymphocyte***
 (CTL)-inducing compn. and .gtoreq.1 agent capable of neutralizing or
 down-regulating the activity of tumor-secreted immunosuppressive factors
 such as TGF-.beta. and IL-10, sep. or in combination. The CTL inducer is
 typically a vaccine for enhancing tumor immunity which lacks an

immunostimulating ***peptide*** component and is formulated as a stable oil-in-water emulsion contg. a micelle-forming agent. The combination produces a synergistic enhancement of the CTL response. Since TGF-.beta. neg. regulates and/or inhibits the growth of hematopoietic cells, the treatment can improve hematopoiesis during cancer therapy. Thus, mice bearing progressively growing ovalbumin-expressing EG7 tumors showed a delay in tumor growth after treatment with 30 .mu.g ovalbumin in Provax adjuvant and 50 .mu.g anti-TGF-.beta. ***antibodies*** .

S0 PCT Int. Appl., 41 pp.
CODEN: PIXXD2

=> 19 and 1970-2004/py
L13 9 L9 AND 1970-2004/PY

=> d his

(FILE 'HOME' ENTERED AT 03:40:12 ON 17 NOV 2008)

FILE 'MEDLINE, BIOSIS, CAPLUS' ENTERED AT 03:40:58 ON 17 NOV 2008

L1 35311 EGFR
L2 53835 "EPIDERMAL GROWTH FACTOR RECEPTOR"
L3 62793 L1 OR L2
L4 48904 "CYTOTOXIC T LYMPHOCYTE"
L5 79 L3 AND L4
L6 55 L5 AND 1970-2005/PY
L7 29 L6 AND ANTIBOD?
L8 18 DUP REM L7 (11 DUPLICATES REMOVED)
L9 10 L8 AND PEPTIDE
L10 19 KYOGO?/AU AND ITOH?/AU
L11 0 SHIGEKI?/AU AND SHICHIJO?/AU
L12 0 L9 AND L10
L13 9 L9 AND 1970-2004/PY

=> logoff